Fill in this information to identify your case.	entered	08/17/18 12:56:22 Desc Main f 64
United States Bankruptcy Court for the:	Document Tage 1 o	
Northern District of Illinois		
Case number (If known):	napter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Camille First name N. Middle name Ortiz Last name	First name Middle name Last name				
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)				
2.	All other names you have used in the last 8 years	First name	First name				
	names.	Middle name	Middle name				
		Last name	Last name				
		First name	First name				
		Middle name	Middle name				
		Last name	Last name				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx-xx- <u>8</u> <u>7</u> <u>4</u> <u>1</u> OR	xxx-xx				
	Identification number (ITIN)	9xx - xx	9xx-xx				

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☑I have not used any business names or EINs.	☐ I have not used any business names or EINs.			
	Include trade names and doing business as names	Business name	Business name			
		Business name	Business name			
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		Street Street	Number Street			
		Chicago, IL 60629 City State ZIP Code	City State ZIP Code			
		Cook County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number Street	Number Street			
		P.O. Box	P.O. Box			
		City State ZIP Code	City State ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:			
		✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)			

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Par	t 2: Tell the Court About Yo	Bankruptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under	theck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13				
8.	How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 				
9.	Have you filed for bankruptcy within the last 8 years?	Mo. When Case number MM / DD / YYYY District When Case number MM / DD / YYYY District When Case number MM / DD / YYYY District When Case number				
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No. Pebtor				
11.	Do you rent your residence?	 No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition. 				

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Par	t 3: Report About Any Busin	esses	You Own as a Sole P	roprietor			
		√ No	o. Go to Part 4.				
12.	Are you a sole proprietor of any full- or part-time business?	☐ Ye	s. Name and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is	— Na	me of business, if any				
	not a separate legal entity such as a corporation, partnership, or LLC.	_					
	If you have more than one sole proprietorship, use a separate	Nu	mber Street				
	sheet and attach it to this petition.	_					
		Cit	у		State	ZIP Code	
		Cł	neck the appropriate box to d	describe your busii	ness:		
			Health Care Business (as				
			Single Asset Real Estate	,	- ' ''		
			Stockbroker (as defined in				
			Commodity Broker (as def	ined in 11 U.S.C. §	101(6))		
			Notife of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadlin operation	nes. If you indicate that you a cons, cash-flow statement, ar C. § 1116(1)(B). I am not filing under Co. I am filing under Chal Bankruptcy Code.	re a small business ad federal income to Chapter 11. oter 11, but I am N	debtor, you must a ax return or if any of the control of a small busines	a small business debtor so the attach your most recent balance of these documents do not exist as debtor according to the definition	ee sheet, statement of st, follow the procedure in inition in the
		☐ Ye	s. I am filing under Chal Code.	oter 11 and I am a	smali business deb	tor according to the definition	in the Bankruptcy
Par	t 4: Report if You Own or Ha	ave An	y Hazardous Property	or Any Prope	rty That Needs	s Immediate Attention	
		☑ No).				
14.	Do you own or have any property that poses or is alleged to pose a threat of	☐ Ye					
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is	needed, why is it r	eeded?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number S	reet		
				City		State	ZIP Code

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

]	I am not required to receive a briefing about credit
	counceling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Par	t 6: Answer These Question	ons for	Reporting Purposes						
16.	What kind of debts do you have?	16a.			debts? Consumer debts are defin , family, or household purpose."	ed in 11 U	.S.C. § 101(8) as "incurred by		
No. Go to line 16b.									
			✓ Yes. Go to line 17.	Yes. Go to line 17.					
		16b.			debts? Business debts are debts the operation of the business or inve	•	curred to obtain money for a		
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c.	State the type of debts you	owe that a	are not consumer debts or business	s debts.			
17.	Are you filing under Chapter 7	? 🗆	No. I am not filing under 0	Chapter 7	'. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	₫			you estimate that after any exemp will be available to distribute to uns				
		Ò	1-49 🔲 50-99		1,000-5,000	□ 2	5,001-50,000 50,000-100,000		
18.	How many creditors do you estimate that you owe?		100-199 200-999		10,001-25,000		fore than 100,000		
		√	\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion		
19.	How much do you estimate		\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion		
	your assets to be worth?		\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion		
			\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion		
20.	How much do you estimate		\$50,001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion		
	your liabilities to be?		\$100,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion		
			\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion		
Par	t 7: Sign Below								
Foi	If I hav Code. If no a obtain I reque I unde	e chose I unders torney re ed and re est relief rstand m sult in fin	n to file under Chapter 7, I an tand the relief available unde epresents me and I did not pa ead the notice required by 11 in accordance with the chap naking a false statement, con	n aware to reach charge are ach charge as well	apter, and I choose to proceed unce to pay someone who is not an att 342(b). 11, United States Code, specified	r Chapter 7 der Chapte corney to he I in this pet erty by frau	7, 11,12, or 13 of title 11, United States or 7. elp me fill out this document, I have ition. ud in connection with a bankruptcy case		
	Executed on <u>08/17/2018</u> MM/ DD/ YYYY								

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert J Adams	Date 08/17/2018
Robert J Adams, Attorney	MM / DD / YYYY
Behard I Adams	
Robert J Adams	
Printed name	
Robert J. Adams & Associates	
Firm name	
540 E. 35th Street	
O-TO L. OOLII OLI CCI	
Number Street	IL 60616
Number Street Chicago	IL 60616 State ZIP Code
Number Street Chicago	IL 60616 State ZIP Code
Number Street Chicago	
Number Street Chicago City	State ZIP Code
Number Street Chicago City	
Number Street	State ZIP Code

Fill in this information to	o identify your case a	17/18 12:56:22	Desc Main		
Debtor 1	Camille	N.	Ortiz		
	First Name	Middle Name	Last Name		
Debtor 2	=:				
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankrup	otcy Court for the:	N	orthern District of Illinois		☐ Check if this is an
Case number _					amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In
1.	Do you own or have any legal or equitable interest in any residence, building, land, or similar property?
	☑ No. Go to Part 2.
	☐ Yes. Where is the property?

Debto	or 1	Cashe 18-2 First Name	23282 _{N.} Doc	1 Filed 08/17/18 Document	Entered 08/17/: Page 9 of 64	18 12:56:22 Des	c Main
		_			-		
Part	2	Describe Your Veh	nicles				
you o' 3. C	wn Cars	that someone else drives. s, vans, trucks, tractors, s	. If you lease a vehicle	tin any vehicles, whether they are, also report it on Schedule G: Es, motorcycles Who has an interest in the pr Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is community instructions)	recutory Contracts and L reporty? Check one. and another	Jnexpired Leases.	
	.2	own or have more than or Make: Model: Year: Approximate mileage: Other information:	Dodge Challenger 2011 110000	Who has an interest in the pr ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors a ☐ Check if this is community instructions)	and another	Do not deduct secured cla amount of any secured cla Creditors Who Have Clair Current value of the entire property? \$1,500.00	
5. <i>i</i>	Exa	amples: Boats, trailers, mo No Yes d the dollar value of the p	otors, personal water	ther recreational vehicles, other craft, fishing vessels, snowmobile all of your entries from Part 2,	es, motorcycle accessorie including any entries fo	es r pages	\$9,550.00
)	you	nave attached for Part 2	write that number	here		·············	40,000.00
Part	: 3	: Describe Your Per	sonal and Hous	ehold Items			
Doy	you	own or have any legal o	or equitable interest	in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
6. H	lou	sehold goods and furni	shings				
E	_	<i>mples:</i> Major appliances	s, furniture, linens, ch	nina, kitchenware			
١	7	No Yes. Describe	Five rooms of furnit	ure of various ages			\$250.00

Deb	btor 1 Camille 1 First Name	.8-23282. Doc 1 Filegros/17/18 Entered 08/17/18 12:56:22 Desc less Middle Name Document Page 10 of 64	Main
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; vices including cell phones, cameras, media players, games Three Tv's, Cell Phone, and other assorted electronic items	\$300.00
		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	
9.		nd hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; ols; musical instruments	
10.	Examples: Pistols, rifles No Yes. Describe	s, shotguns, ammunition, and related equipment	
11.		lothes, furs, leather coats, designer wear, shoes, accessories Clothing	\$350.00
12.	. Jewelry Examples: Everyday jew ✓ No ☐ Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
13.	Non-farm animals Examples: Dogs, cats, ✓ No ☐ Yes. Describe	, birds, horses	
14.	Any other personal and No Yes. Describe	I household items you did not already list, including any health aids you did not list	
15.		all of your entries from Part 3, including any entries for pages you have attached umber here→	\$900.00

Official Form 106A/B Schedule A/B: Property page 3

Part 4: Describe Your Financial Assets

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Do	you own or h	ave any legal or equitable interest in any of the		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	☐ No	Money you have in your wallet, in your home, in a	safe deposit box, and on hand when you file your petition Cash	\$60.00
17.		Checking, savings, or other financial accounts; or similar institutions. If you have multiple accounts were supplied to the control of the country of the co	ertificates of deposit; shares in credit unions, brokerage houses, and other with the same institution, list each.	
			Institution name:	
		17.1. Checking account:	PNC Bank	\$5.00
		17.2. Checking account:		
		17.3. Savings account:	PNC Bank	\$0.00
		17.4. Savings account:		
		17.5. Certificates of deposit:		
		17.6. Other financial account:		
		17.7. Other financial account:		
		17.8. Other financial account:		
		17.9. Other financial account:		
18.	Bonds, mutu	ual funds, or publicly traded stocks		
		Bond funds, investment accounts with brokerage f	ïrms, money market accounts	
	✓ No ☐ Yes			
19.		y traded stock and interests in incorporated an tnership, and joint venture	d unincorporated businesses, including an interest in	
	No Yes. Give information them	on about		

√ No

Yes. Give specific information about them....

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Debi	or 1	<u>Camille</u>	3 20204N. DOO	_ 01112	Dema 12 of C4	Case number (if known)	
		First Name	Middle Nam	e Dogyment	Page 12 of 64		
20.	Governmen	nt and corpo	rate bonds and other	negotiable and non-negoti	able instruments		
	-			cashiers' checks, promissory			
		ible instrumen	its are those you cannot	t transfer to someone by sign	ling or delivering them.		
	☑ No						
	Yes. Giv	e specific ion about					
	them						
24	Detiroment	ar nanaian a	a a a cumto				
۷۱.	Retirement	•		1(k) 402(h) thrift sovings as	counts, or other pension or pro	fit charing plans	
		interests in i	KA, EKISA, Keugii, 40	r(k), 405(b), trimit savings at	counts, or other pension or pro	nit-snanng pians	
	☐ No						
	separate	each accoun elv.	ıı				
		,	Type of account:	Institution name:			
			Type of account.	institutori riarrie.			
			Pension plan:	University of Illinois			unknown
22.	Security dep	posits and pr	repayments				
	Your share of all unused deposits you have made so that you may continue service or use from a company						
	Examples: A others	greements w	rith landlords, prepaid re	ent, public utilities (electric, g	as, water), telecommunications	companies, or	
	✓ No						
	Yes						
23.		A contract for	a periodic payment of m	noney to you, either for life or	for a number of years)		
	_		p p y	,,,	,		
	✓ No ☐ Yes						
	□ 165						
24.	Interests in	an education	n IRA, in an account in	a qualified ABLE program	, or under a qualified state tui	tion program.	
	26 U.S.C. §	§ 530(b)(1), 5	529A(b), and 529(b)(1).				
	√ No						
	Yes						
25.	Trusts, equi	itable or futu	re interests in property	y (other than anything listed	d in line 1), and rights or powe	ers exercisable for your	
	✓ No						
	_	e specific					
		ion about ther	n				
26.	Patents, cop	pyrights, trac	demarks, trade secrets	, and other intellectual prop	perty		
	Examples:	Internet dom	nain names, websites, p	roceeds from royalties and lie	censing agreements		
	√ No						
	Yes. Giv	e specific					
	informati	ion about ther	n				
27.	Licenses, fr	anchises, an	nd other general intang	ibles			
	Examples:	Building peri		s, cooperative association ho	oldings, liquor licenses,		

Debi	tor 1 Cash 18-23282 Desc Main First Name Middle Name Document Page 13 of 64
28.	Tax refunds owed to you ✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ✓ No ☐ Yes. Give specific information
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ✓ No Yes. Give specific information
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ✓ No ☐ Yes. Give specific information
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Volume No Yes. Describe each claim
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Volume No Yes. Describe each claim
35.	Any financial assets you did not already list No Yes. Give specific information
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here
Par	t 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

✓ No. Go to Part 6.

☐ Yes. Go to line 38.

Debtor 1 Cashe 18-23282, Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main

First Name Middle Name Document Page 14 of 64

Middle Name Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **✓** No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2..... \$0.00 Part 2: Total vehicles, line 5 \$9,550.00 Part 3: Total personal and household items, line 15 \$900.00 58. Part 4: Total financial assets, line 36 \$65.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61...... \$10,515.00 Copy personal property total -\$10,515.00 \$10,515.00 Total of all property on Schedule A/B. Add line 55 + line 62.....

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				<u> </u>		
Fill in this information to identify your case:						
Debtor 1	Camille	N.	Ortiz			
	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	N	orthern District of III	inois		
Case number						
(if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt					
 Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption.			
Brief description: 2006 Land Rover Range Rover Sport Line from Schedule A/B: 3.1	\$8,800.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)		
Brief description: 2011 Dodge Challenger Line from Schedule A/B: 3.2	\$750.00	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)		
3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes					

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Case number (if known).

Debtor 1

Camille N. Ortiz
First Name Middle Name Last Name

Additional Page Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: 735 ILCS 5/12-902 Five rooms of furniture of various ages \$250.00 100% of fair market value, up to any applicable statutory limit Schedule A/B: Brief description: 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Three Tv's, Cell Phone, and other assorted electronic 100% of fair market value, up to items any applicable statutory limit Line from Schedule A/B: Brief description: 735 ILCS 5/12-1001(a), (e) \$350.00 \$350.00 Clothing 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 11 Brief description: \$60.00 735 ILCS 5/12-1001(b) \$60.00 Cash 100% of fair market value, up to any applicable statutory limit Line from 16 Schedule A/B: Brief description: 735 ILCS 5/12-1001(b) \$5.00 PNC Bank 100% of fair market value, up to Checking account any applicable statutory limit

Line from Schedule A/B:

17

Fill in this information	to identify your case:			17/1 1	8 12:56:22 I	Desc Main	
Debtor 1	Camille	N.	Ortiz				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	uptcy Court for the:		lorthern District of Illin	ois			
	.,,					☐ Check if this is a	nn.
Case number (if known)						amended filing	11 1
Official Form	106D						
Official Form							
Schedule I	D: Credito	rs Who H	ave Claims	Secured by	/ Property		12/15
No. Check this b ✓ Yes. Fill in all of the Part 1: List All S	the information below. Secured Claims	n to the court with yo	our other schedules. You	have nothing else to repo	rt on this form.	Column B	Column C
	n one creditor has a pa Ilphabetical order acco		ne other creditors in Part 's name.	2. As much as possible,	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Wells Fargo Dea	alers Svcs	Describe	the property that secur	es the claim:	\$13,751.00	\$8,800.00	\$4,951.00
Creditor's Name PO Box 1697		2006 La	nd Rover Range Rover S	Sport			
	eet	As of the	date you file, the claim	is: Check all that apply			
Winterville, NC 2 City		Code Contid	•	is. Oneck all triat apply.			
Who owes the d	ebt? Check one.	Unlqu	,				
☑ Debtor 1 only		☐ Disput					
Debtor 2 only		·	f lien. Check all that appl	V.			
Debtor 1 and [Debtor 2 only the debtors and another	√ An ag	reement you made (such	•			
			ed car loan)				
☐ Check if this of community do			ory lien (such as tax lien, nent lien from a lawsuit	mechanic's lien)			
-		 Juagn	ieni iien irom a iawsult				

Other (including a right to offset)

Add the dollar value of your entries in Column A on this page. Write that number here:

Last 4 digits of account number ____ ___

Date debt was incurred

03/03/2017

\$13,751.00

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Part 1: Additional Page After listing any entries on with 2.3, followed by 2.4, a	this page, number them beginning and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2Creditor's Name	Describe the property that secures the claim:		_	
Creditor s Name				
Number Street	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contigent			
Who owes the debt? Check one.	☐ Unlquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Nature of lien. Check all that apply.			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ An agreement you made (such as mortgage or secured car loan)			
Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lien)			
community debt	☐ Judgment lien from a lawsuit			
Date debt was incurred	Other (including a right to offset)			
	Last 4 digits of account number			
Add the dollar value of your entries in Colur	nn A on this page. Write that number here:	\$0.00		
If this is the last page of your form, add the here:	dollar value totals from all pages. Write that number	\$13,751.00		

	40.000			17/18 12:56:22	Desc Ma	iin
Fill in this information t	o identify your case:					
Debtor 1	Camille First Name	N. Middle Name	Ortiz Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru			Northern District of Illinois			
Case number (if known)					Check if amende	this is an d filing
Official Form		tors Who	Llava Uncaqurad (Noime		
Scriedule i	z/r. Credi	LOIS WITO	Have Unsecured C	iaiiiis		12/15
Schedule G: Executor D: Creditors Who Hole	y Contracts and Une d Claims Secured b to this page. On the	expired Leases (Off y Property. If more e top of any additio	in a claim. Also list executory contracts ficial Form 106G). Do not include any crespace is needed, copy the Part you need and pages, write your name and case not aims	editors with partially secure d, fill it out, number the en	d claims that ar	e listed in Schedule
identify what type possible, list the c Part 1. If more tha	iority unsecured cla of claim it is. If a clair laims in alphabetical an one creditor holds	ims. If a creditor has n has both priority an order according to to a particular claim, li	s more than one priority unsecured claim, and nonpriority amounts, list that claim here he creditor's name. If you have more than ist the other creditors in Part 3.	and show both priority and r	nonpriority amou	nts. As much as
	,	·	,	Total	Priority	Nonpriority
				claim	amount	amount
Priority Creditor's	s Name		Last 4 digits of account number When was the debt incurred?			
Number S	Street		As of the date you file, the claim is: C apply. Contingent	heck all that		
City Who incurred	State the debt? Check on		☐ Unliquidated☐ Disputed			
Debtor 1 or Debtor 2 or Debtor 1 ar At least one	nly nly nd Debtor 2 only e of the debtors and a	nother	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you of government			
☐ Check if th	is claim is for a con bject to offset?		Claims for death or person injury w intoxicatedOther. Specify	hile you were		

Is the claim subject to offset?

☐ No
☐ Yes

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Part	2: List All of Your NONPRIORITY Unsecured Claim	S					
3. [Oo any creditors have nonpriority unsecured claims against you?						
_	No. You have nothing to report in this part. Submit this form to the court with your other schedules.						
	✓ Yes.	••••••••••••••••••••••••••••••••••••••					
4. և Մ	List all of your nonpriority unsecured claims in the alphabetical or unsecured claim, list the creditor separately for each claim. For each of	der of the creditor who holds each claim. If a creditor has more than o claim listed, identify what type of claim it is. Do not list claims already incrt 3. If you have more than three nonpriority unsecured claims fill out the	luded in Part 1. If more				
			Total claim				
4.1	FedLoan Servicing,	Last 4 digits of account number	\$31,090.00				
	Nonpriority Creditor's Name	•					
	Po Box 69184	When was the debt incurred?					
	Number Street	As of the date you file, the claim is: Check all that apply. Contingent					
	Harrisburg, PA 17106 City State ZIP Code	☐ Unliquidated					
	•	☐ Disputed					
	Who incurred the debt? Check one.	·					
	Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans					
	Debtor 2 only	Obligations arising out of a separation agreement or					
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims					
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other					
	☐ Check if this claim is for a community debt	similar debts					
	Is the claim subject to offset? No	☑ Other. Specify					
	¥ No ☐ Yes						
	Yes						
4.2	Abc Financial	Last 4 digits of account number	unknown				
	Nonpriority Creditor's Name	When was the debt incurred?					
	PO Box 6800 Number Street	As of the date you file, the claim is: Check all that apply.					
	North Little Rock, AR 72124	☐ Contingent					
	City State ZIP Code	☐ Unliquidated					
	Who incurred the debt? Check one.	☐ Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 					
	At least one of the debtors and another	divorce that you did not report as priority claims					
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 					
	Is the claim subject to offset?	✓ Other. Specify					
	☑ No	Curon opeony					
	☐ Yes						
12			unknown				
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number					
	15000 Capital One	When was the debt incurred?					
	Number Street	As of the date you file, the claim is: Check all that apply.					
	Richmond, VA 23238	Contingent					
	City State ZIP Code	Unliquidated					
	Who incurred the debt? Check one.	☐ Disputed					
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	Student loans					
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other					
	☐ Check if this claim is for a community debt	similar debts					
	Is the claim subject to offset?	☑ Other. Specify					
	☑ No						
	☐ Yes						

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Part	2: Your NONPRIORITY Unsecured Claims - Co	ntinuation Page	
Afte	r listing any entries on this page, number them beginning v	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,558.00
	PO Box 85147	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Richmond, VA 23276	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No		
	☐ Yes		
4.5	Central Credit Services,LLC	Last 4 digits of account number	\$206.81
	Nonpriority Creditor's Name	-	
	9550 Regency Square Blvd, #500A	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Jacksonville, FL 32225	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	■ Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No		
	Yes		
4.6	City Of Chicago(Parking Tickets) Nonpriority Creditor's Name	Last 4 digits of account number	\$912.00
	Office Of The Clerk: Attn: Anna Valencia	When was the debt incurred?	
	121 N. LaSalle 107A	As of the date you file, the claim is: Check all that apply.	
	Number Street	Contingent	
	Chicago, IL 60602	Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☑ Debtor 1 only	☐ Student loans	
	☐ Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts ☑ Other. Specifv	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	☐ Yes		

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Part	2: Your NONPRIORITY Unsecured Claims - Co	ntinuation Page	
Afte	er listing any entries on this page, number them beginning v	with 4.5, followed by 4.6, and so forth.	Total claim
4.7	Comcast	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name	· · · · · · · · · · · · · · · · · · ·	
	PO Box 3002	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Southeastern, PA 19398	Contingent	
	City State ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No	— Other. Specify	
	☐ Yes		
4.8	Credit Collection Services	Lost 4 digits of consumt number	\$410.24
	Nonpriority Creditor's Name	Last 4 digits of account number	
	725 Canton St	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Norwood, MA 02062-2679	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts ☑ Other, Specify	
	✓ No	☑ Other. Specify	
	☐ Yes		
4.9	Credit One Bank		unknown
7.5	Nonpriority Creditor's Name	Last 4 digits of account number	
	PO Box 98872	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Las Vegas, NV 89193	Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	lue Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other 	
	•	similar debts	
	Is the claim subject to offset? ☑ No	☑ Other. Specify	
	Vas		
	I YAC		

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Afte	listing any entries on this page, number them beginning v	with 4.5, followed by 4.6, and so forth.	Total claim
4.10	Edward R. Szymanski	Last 4 digits of account number	unknown
	Nonpriority Creditor's Name	When was the debt incurred?	
	POP Box 5358 Number Street	As of the date you file, the claim is: Check all that apply.	
	Elgin, IL 60121	☐ Contingent	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
	·	similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	Yes		
.11	Facts Management	Last 4 digits of account number	\$7,086.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	121 S. 13th St. 301 Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Lincoln, NE 68508 City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	·	
	_	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No		
	Yes		
12	Kohls Department Store	Last 4 digits of account number	\$232.00
	Nonpriority Creditor's Name	•	
	N56W17000 Ridgewood	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Menomonee Falls, WI 53051 City State ZIP Code	Contingent	
	•	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No		
	Yes		

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Northwest Collectors Inc.	Last 4 digits of account number	\$200.
Nonpriority Creditor's Name	When was the debt incurred?	
3601 Algonquin Rd. Ste. 500 Number Street	As of the date you file, the claim is: Check all that apply.	
Rolling Meadows, IL 60008-3146	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
•	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No		
☐ Yes		
Personal Finance Company	Last 4 digits of account number	<u>\$306.</u>
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 43490 Number Street	As of the date you file, the claim is: Check all that apply.	
Nottingham, MD 21236	☐ Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
·	similar debts	
Is the claim subject to offset?	✓ Other. Specify	
☑ No		
☐ Yes		
Simm Associates, Inc.	Last 4 digits of account number	\$445.
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 7526 Number Street	As of the date you file, the claim is: Check all that apply.	
Newark, DE 19714-7526	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or 	
At least one of the debtors and another	divorce that you did not report as priority claims	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other	
·	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No		

Debtor 1 Camille

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page							
After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.							
Sir Finance Nonpriority Creditor's Name 424 W. 31st St Number Street Chicago, IL 60616 City State ZIP Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$9,043.95					

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First Name Middle Name Last Name

6j. Total. Add lines 6f through 6i.

Part 4: Add	the Amounts for Each Type of Unsecured Claim				
	nounts of certain types of unsecured claims. This informati ecured claim.	ion is for s	tatist	ical reporting purposes only. 28 U.S.0	C. §159. Add the amounts for each
				Total claim	
Total claims	6a. Domestic support obligations	6a.		\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.		\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00	1
	6e. Total. Add lines 6a through 6d.	6e.		\$0.00	
				Total claim	
Total claims	6f. Student loans	6f.		\$0.00	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00	
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$51,690.64	

6j.

\$51,690.64

Fill in this information	to identify your case:				.7/18 12:56:22	Desc Main	
Debtor 1	Camille	N.	Ortiz				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	uptcy Court for the:	N	orthern District of Illino	ois			
Case number (if known)						Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with wh	om you have	e the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill	in this information	to identify your case:			- 1004	L7/18 12:56:22	Desc Main
ר	ebtor 1	Camille	N.	Ortiz	.go <u>-</u> o o. o		
	ebioi i	First Name	Middle Name	Last Name			
D	ebtor 2						
(8	Spouse, if filing)	First Name	Middle Name	Last Name			
U	nited States Bankr	uptcy Court for the:	N	orthern District of Illinoi	s		
_	ase number known)						Check if this is an amended filing
01	ficial Form	n 106H					
So	chedule	H: Your Co	odebtors				12/15
botl	n are equally resp	onsible for supplyin	g correct information	n. If more space is neede	d, copy the Addit	ional Page, fill it out, and	o married people are filing together, I number the entries in the boxes or a). Answer every question.
1.	Do you have any √I No ☐ Yes	codebtors? (If you a	are filing a joint case, o	do not list either spouse as	s a codebtor.)		
2.	Louisiana, Nevad	a, New Mexico, Puerl		operty state or territory? ngton, and Wisconsin.)	(Community prop	erty states and territories i	nclude Arizona, California, Idaho,
	No. Go to line		a antanatan malant	و معالم ما الماس ما الماس ما الماس ما الماس ما الماس			
	☐ No	spouse, former spous	se, or legal equivalent	live with you at the time?			
	_	ch community state o	r territory did you live?		Fill in	the name and current add	dress of that person.
	Name						
	Number	Street					
	City		State ZIP Code				
3.	codebtor only if	that person is a gua	rantor or cosigner. N		the creditor on S	Schedule D (Official Forn	erson shown in line 2 again as a n 106D), <i>Schedule E/F</i> (Official
	Column 1: Your c	odebtor			Co	olumn 2: The creditor to w	hom you owe the debt
						Chook all ashadulas that a	

Official Form 106H Schedule H: Your Codebtors page 1 of 1

☐ Schedule D, line _

Schedule E/F, line _____

3.1

Name

Number

City

Street

State

ZIP Code

Fill i	n this information to	o identify your cas	se:		17/18 12:5	56:22 Des	c Main	
	btor 1	Camille First Name	N. C	Ortiz ast Name				
(Sp Un Ca	btor 2 bouse, if filing) ited States Bankrup se number known)	First Name otcy Court for the:		est Name				
	icial Form		come			MM / DD / Y		12/15
nforn pour dditi Pan	mation. If you are a se is not filing with ional pages, write your 1: Describe Fill in your employ	married and not h you, do not ind your name and c Employment	ele. If two married people are filing jointly, and your spou clude information about you case number (if known). Ans	se is living with you, includ r spouse. If more space is wer every question.	de information about you	r spouse. If you ar te sheet to this for	re separated and your rm. On the top of any	
	information. If you have more the attach a separate p information about a employers. Include part time, so self-employed work Occupation may incorrect or homemaker, if it	age with Idditional easonal, or Clude student	Employment status Occupation Employer's name Employer's address	Debtor 1 Debtor 1 Not Employed Not Employe		Debtor 2 or I	Not Employed	
Dar	rt 2: Give Deta	ails About Mo	How long employed there	•	State Zip Code	City	State Zip Cod	de et
;	Estimate monthly are separated.	income as of the	e date you file this form. If you		employers for that person o	-		
			nd commissions (before all lulate what the monthly wage w		\$0.00	son-filing spouse	_	
3.	Estimate and list n	monthly overtime	е рау.	3. +_	\$0.00 +	\$0.00	<u>'</u>	

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

				For Debtor 1		For Debto			
	Copy line 4 here→	4.		\$0.00			\$0.00		
5.	List all payroll deductions:								
	5a. Tax, Medicare, and Social Security deductions	5a.		\$0.00			\$0.00		
	5b. Mandatory contributions for retirement plans	5b.		\$0.00			\$0.00		
	5c. Voluntary contributions for retirement plans	5c.		\$0.00			\$0.00		
	5d. Required repayments of retirement fund loans	5d.		\$0.00			\$0.00		
	5e. Insurance	5e.		\$0.00			\$0.00		
	5f. Domestic support obligations	5f.		\$0.00			\$0.00		
	5g. Union dues	5g.		\$0.00			\$0.00		
	5h. Other deductions. Specify:	5h.	+	\$0.00		F	\$0.00		
6		6.		\$0.00			\$0.00		
6. 7	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	o. 7.		\$0.00		-	\$0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.		φυ.υυ			φυ.υυ_		
8.	List all other income regularly received:								
	 Net income from rental property and from operating a business, profession, or farm 								
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.								
	8b. Interest and dividends	8a.		\$0.00			\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.		\$0.00			\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	0-		\$472.00			\$0.00		
	8d. Unemployment compensation	8c.		\$0.00			\$0.00		
	8e. Social Security	8d.		\$0.00			\$0.00		
	8f. Other government assistance that you regularly receive	8e.					<u> </u>		
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
	Specify: Food Stamps	8f.		\$640.00			\$0.00		
	8g. Pension or retirement income	8g.		\$0.00			\$0.00		
	8h. Other monthly income. Specify: Disability Income	8h.	+	\$1,991.00		-	\$0.00		
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$3,103.00		-	\$0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.		\$3,103.00	+		\$0.00	=	\$3,103.0
11.	State all other regular contributions to the expenses that you list in Schedule .	J.							
	Include contributions from an unmarried partner, members of your household, your of friends or relatives.	depend	ents, you	ur roommates, ar	nd otl	ner			
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	e to pay	expenses listed i	n <i>Sc</i>	nedule J.			
	Specify:						11. 4	·	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The resu amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform			•	me. V	Vrite that	12.		\$3,103.00
									mbined nthly income
13.	Do you expect an increase or decrease within the year after you file this form? No.								
	Yes. Explain: Debtor is off work right now due to her pregnancy but will resum	e work	ing in a f	ew months					
	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		J						

Fill	in this information to	identify your case:			17/18 12:56:22	Desc Main
D	ebtor 1	Camille First Name	N. Ortiz Middle Name Last Nar	ne	Check if this is:	
U _i	(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (if known)				A supplement show chapter 13 income	wing postpetition eas of the following date:
Se a	ded, attach another s	Your Expurate as possible. If				12/15 prrect information. If more space is swer every question.
	Is this a joint case? No. Go to line 2. Yes. Does Debto No Yes. D	or 2 live in a separa	te household? cial Form 106J-2, <i>Expenses fo</i>	r Separate Household of Debte	or 2.	
2.	Do you have deper Do not list Debtor 1 Debtor 2. Do not state the deper	and	☑ No ☑ Yes. Fill out this information each dependent	Dependent's relations Debtor 1 or Debtor 2 Child Child Child Child Child Child	20 12 9 7 newborn	Does dependent live with you? No. Yes. No. Yes. No. Yes. No. Yes. No. Yes.
3.	Do your expenses i of people other that your dependents?	•	☑No □Yes			
Est the	timate your expense bankruptcy is filed.	s as of your bankru If this is a supplem for with non-cash ç	onthly Expenses ptcy filing date unless you are ental Schedule J, check the books of the books	ox at the top of the form and know the value of		to report expenses as of a date after Your expenses
4.	The rental or home ground or lot. If not included in line		es for your residence. Include f	irst mortgage payments and a	ny rent for the 4.	\$1,200.00
	4a. Real estate taxes	3			4a.	\$0.00
	4b. Property, homeo	wner's, or renter's in	surance		4b.	\$0.00
	4c. Home maintenan	ce, repair, and upkee	ep expenses		4c.	\$0.00
	Ad Harris and C				4d.	00.02

4d. Homeowner's association or condominium dues

\$0.00

Cashe 18-23282, Doc 1 Filed 08/17/18 Entered 08/17/18 22:56:22 (if k Desc Main First Name Middle Name Document Page 32 of 64

			Your expenses
5. A	additional mortgage payments for your residence, such as home equity loans	5.	
6. L	Itilities:		
6	a. Electricity, heat, natural gas	6a.	\$60.00
6	b. Water, sewer, garbage collection	6b.	\$0.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$360.00
6	d. Other. Specify:	6d.	\$0.00
7. F	ood and housekeeping supplies	7.	\$640.00
8. C	Childcare and children's education costs	8.	\$150.00
9. C	Clothing, laundry, and dry cleaning	9.	\$250.00
10. P	Personal care products and services	10.	\$0.00
	/ledical and dental expenses	11.	\$0.00
	ransportation. Include gas, maintenance, bus or train fare.		
	On not include car payments.	12.	\$0.00
13. E	intertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. C	Charitable contributions and religious donations	14.	\$0.00
15. I r	nsurance.		
С	Oo not include insurance deducted from your pay or included in lines 4 or 20.		
1	5a. Life insurance	15a.	\$0.00
1	5b. Health insurance	15b.	\$0.00
1	5c. Vehicle insurance	15c.	\$185.00
1	5d. Other insurance. Specify:	15d.	\$0.00
16. T	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	Ф0.00
S	Specify:	16.	\$0.00
17. I r	nstallment or lease payments:		.
	7a. Car payments for Vehicle 1	17a.	\$441.00
	7b. Car payments for Vehicle 2	17b.	
	7c. Other. Specify:	17c. 17d.	
	7d. Other. Specify:	17 u .	
	our payments of alimony, maintenance, and support that you did not report as deducted or your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19. C	Other payments you make to support others who do not live with you.		
S	Specify:	19.	\$0.00
20. C	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
2	0a. Mortgages on other property	20a.	\$0.00
2	0b. Real estate taxes	20b.	\$0.00
2	0c. Property, homeowner's, or renter's insurance	20c.	\$0.00
2	0d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
2	0e. Homeowner's association or condominium dues	20e.	\$0.00

Cashe 18-23282. Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 in Desc Main

Debtor 1 Dogument Page 33 of 64 Middle Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. 22a. Add lines 4 through 21. \$3,286.00 22b. \$0.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$3,286.00 22c. 23. Calculate your monthly net income.

23b. Copy your monthly expenses from line 22c above.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23c. Subtract your monthly expenses from your monthly income. (\$183.00) 23c. The result is your monthly net income.

23a.

23b.

\$3,103.00

\$3,286.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your

mongage pa	syment to increase or decrease because or a modification to the terms or your mortgage?
☑No. ☑Yes.	Explain here:
⊻ Yes.	Debtor's expenses will increase when she goes back to work

Fill in this information	to identify your case:			17/18 12:56:22	Desc Main
Debtor 1	Camille First Name	N. Middle Name	Ortiz Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankru			orthern District of Illinois		
Case number (if known)					Check if this is an amended filing
Official Form	1060				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$10,515.00 \$10,515.00
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$13,751.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$51,690.64 \$65,441.64
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,103.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,286.00

Case 18-23282 Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main Debtor 1

Page 35 of 64 **Doocu**ment Case number (if known) -Camille First Name Middle Name Last Name

Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√**1 Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official \$2,496.01 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 9g. Total. Add lines 9a through 9f. \$0.00

Fill in this information	to identify your case:			1//18 12	.50.22	Desc Main
Debtor 1	Camille	N.	Ortiz			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	N	orthern District of Illinois			
Case number (if known)						Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

id you pay or agree to pay someone who is NOT an att	orney to help you fill out bankruptcy forms?
1 No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	,
Inder penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaraion and that they are true and correct.
Jnder penalty of perjury, I declare that I have read the su	
X /s/ Camille N. Ortiz	
	ummary and schedules filed with this declaraion and that they are true and correct.

Case 18-23282 Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main

			Document	Page 37 of 64
Fill in this information to	o identify your case:			
Debtor 1	Camille	N.	Ortiz	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bankru	otcy Court for the:		Northern District of	Illinois
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current	marital status?				
■ Married					
✓ Not married					
During the last 3 years	s, have you lived anywhere c	other than where you live n	ow?		
☑ No					
Yes. List all of the p	places you lived in the last 3 ye	ears. Do not include where y	ou live now.		
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debtor 1		Same as Debtor 1
		_ From			_ From
Number Street		To	Number Street		To
City	State ZIP Code	_	City	State ZIP Code	_
			☐ Same as Debtor 1		Same as Debtor 1
		From			_ From
Number Street		To	Number Street		To
City	State ZIP Code	_	City	State ZIP Code	_

ebtor 1	Case 18-232	282 Doc 1 N.	Filed 08/17/18 Document	3 Entered 08/3 Page 38 of 64		Desc Main
	First Name	Middle Name	Last Name		Caco Harrison (ii iii)	,
include Arizor	na, California, Idaĥo, Lou ake sure you fill out <i>Sche</i>	iisiana, Nevada, Ne	ew Mexico, Puerto Rico, 7	Texas, Washington, and \		nity property states and territories
	plain the Sources o					
Fill in the total	ive any income from em I amount of income you r g a joint case and you ha	eceived from all job	os and all businesses, inc	cluding part-time activities	o previous calendar years? s.)
☐ No						
√ Yes. Fill	I in the details.					
		Debtor	1		Debtor 2	
		Source	es of income Gr	oss Income	Sources of income	Gross Income
		Check	,	efore deductions and clusions)	Check all that apply.	(before deductions and exclusions)
	ary 1 of current year un	ıuı u i c	es, commissions, uses, tips	\$15,100.00	☐ Wages, commissions, bonuses, tips	
	. ,	Oper	ating a business		Operating a business	
	lendar year: to December 31, 2017	-	jes, commissions, uses, tips	\$42,000.00	☐ Wages, commissions, bonuses, tips	
(ouridary 11)	YY'	YY Doper	ating a business		Operating a business	
	endar year before that: to December 31, 2016		jes, commissions, uses, tips	\$40,000.00	☐ Wages, commissions, bonuses, tips	
(January 11	YY'	YY Doper	ating a business		Operating a business	
Include incom payments; per have income t		that income is taxal terest; dividends; m	ole. Examples of other inconey collected from laws	come are alimony; child s		nployment, and other public benel ou are filing a joint case and you
		Debtor	1		Debtor 2	
				oss income from each urce	Sources of income Describe below.	Gross Income from each source
			(be	efore deductions and		(before deductions and
			•	clusions)		exclusions)
	ary 1 of current year un led for bankruptcy:	itil the <u>Food St</u>	exc	(slusions) \$800.00		`

	_				Docum		f 64	
1	<u>Can</u>	nille : Name	N.	Idle Name	Ortiz Last Name		Case number (ii	known)
	1 1130	IName	IVIIC	idle Name	Lastivanie	C		
or las	t calendar y	/ear:		Child	Support	\$5,664.0	0	
lanua	y 1 to Dece	ember 31, <u>2</u>	017)				_	
			YYYY				_	
	-	ear before		<u>Child</u>	Support	\$5,564.0	0	
Januai	y 1 to Dece	ember 31, <u>2</u>	016) YYYY				-	
							- -	
t 3:	List Cert	tain Pavn	nents Y	ou Made B	sefore You File	d for Bankruptcy		
re eitl	ner Debtor	1's or Debto	or 2's deb	ts primarily c	consumer debts?			
□No.	Noithar	Dobtor 1 n	or Dobtor	· 2 has prima	urily consumer de	.hte Consumor dobte are do	fined in 11 U.S.C. § 101(8) as	"incurred by an
					or household purpo:		iiiled iii 11 0.3.0. § 101(0) as	s incurred by arr
	During t	he 90 days	before you	u filed for ban	kruptcy, did you pa	y any creditor a total of \$6,42	25* or more?	
	□No. 0	Go to line 7.						
	Yes.			ditor to whom	a vou poid a total of	f ¢6 12E* or more in one or n	nore payments and the total a	mount you paid that
	— 165.						nild support and alimony. Also	
						pport obligations, such as cr	ilia support alia alimony. Also	, ao not include
Yes.	Debtor 1	payment ct to adjustm or Debtor 2	s to an atto nent on 4/0	orney for this 01/19 and even	bankruptcy case. ery 3 years after tha	at for cases filed on or after th	ne date of adjustment.	, ao not include
Yes.	Debtor 1 of During the	payment or Debtor 2 e 90 days be o to line 7. List below o	s to an attract on 4/0 cor both herore you file each credition domes	orney for this of this of the order of the o	bankruptcy case. ery 3 years after that y consumer debt uptcy, did you pay a you paid a total of \$	at for cases filed on or after the state of	ne date of adjustment.	Do not include
Yes.	Debtor 1 of During the	payment to adjustmor Debtor 2 a 90 days be to line 7.	s to an attract on 4/0 cor both herore you file each credition domes	orney for this of this of the order of the o	bankruptcy case. ery 3 years after that y consumer debt uptcy, did you pay a you paid a total of \$	at for cases filed on or after the state of	ne date of adjustment. more? nount you paid that creditor. D	oo not include to an attorney for
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Case 18-23282 Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main Page 40 of 64 Document Debtor 1 Camille Ortiz Case number (if known) _ First Name Middle Name Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **√**No Yes. List all payments to an insider. Total amount paid Amount you still owe Reason for this payment Dates of payment Insider's Name Number Street State ZIP Code City Insider's Name Number Street ZIP Code City State 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√**No Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still owe Reason for this payment payment Include creditor's name Insider's Name Number Street State ZIP Code City

or 1	Camille	N.	Docun Ortiz	nent Page 4	1 of 64	number (if know	n)
	First Name	Middle Name	Last Nam	ie	_		,
			Dates of payment	Total amount paid	Amount you still owe	Reason for the	
nsider's Na	me						
Number	Street						
City	State	ZIP Code					
Within 1 ye t all such m putes.	natters, including per	for bankruptcy, we	ere you a party in ar	ny lawsuit, court action	, or administrative proce uits, paternity actions, su	eeding? pport or custod	y modifications, and cont
⊻ Yes. Fill	in the details.						
		Nat	ure of the case	Cou	ırt or agency		Status of the case
Case title Case numb	Sir Finance Corp Camille Ortiz er 18SC002155	o. v. Law	suit	Circu	e Circuit Ct. of the Sixteer uit, Kane County, Illinois Name	nth Judicial	☑ Pending ☐ On appeal ☐ Concluded
				Numb	er Street		
				City	State	zIP Code	
				1			
Case title _				,			Pending
Case title _					Name		☐On appeal
Case title							

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mille at Name	N. Middle Name	Explain what hap Property was re Property was g Property was g	epossessed. oreclosed. arnished.	Case number (if known	
	ZIP Code	Property was re	epossessed. oreclosed. arnished.		_
	ZIP Code	Property was re	epossessed. oreclosed. arnished.		_
	ZIP Code	Property was re	epossessed. oreclosed. arnished.		
	ZIP Code	Property was re	epossessed. oreclosed. arnished.		
	ZIP Code	☐ Property was fo	oreclosed. arnished.		
State	ZIP Code	☐ Property was fo	oreclosed. arnished.		
State	ZIP Code	Property was g	arnished.		
State	ZIP Code				
	ZIF Code		ttached, seized, or levied.		
					_
		Explain what har	ppened		
<u> </u>	710.0				
State	ZIP Code	I Topetty was at	lacricu, seizeu, or ievicu.		
	T.	Denovile a the costion the c		Data action was	A
		rescribe the action the c	reditor took	taken	Amount
		est 4 digits of account num	nber: XXXX		
State	ZIP Code				
		any of your property in t	he possession of an assigned	e for the benefit of credi	itors, a court-appointed
tain Gifts and	d Contributions	5			
tain Gifts and	d Contributions	5			
			total value of more than \$600	0 per person?	
			total value of more than \$600	0 per person?	
	or bankruptcy, did		total value of more than \$600	0 per person?	
	State before you filed found for the because you own details. State	State ZIP Code before you filed for bankruptcy, did because you owed a debt? details.	Property was re Property was gas Property was at Property was	Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Property was garnished. Property was attached, seized, or levied. Property was attached, seized, or levied. Describe the action the creditor took Describe the action the creditor took Last 4 digits of account number: XXXX————— State ZIP Code ZIP C	Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts for because you owed a debt? Describe the action the creditor took Date action was taken Last 4 digits of account number: XXXX————— State ZIP Code Defore you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of credit

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Case number (if known) _ Debtor 1 Camille Ortiz First Name Middle Name Last Name Gifts with a total value of more than \$600 per Describe the gifts Value Dates you gave person the gifts Person to Whom You Gave the Gift Number City State ZIP Code Person's relationship to you ___ Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _____ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that Describe what you contributed Value Date you total more than \$600 contributed Charity's Name Number Street City State ZIP Code

Case 18-23282

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Page 44 of 64 Document Debtor 1 Camille Ortiz Case number (if known) _ First Name Middle Name Last Name List Certain Losses Part 6: 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **√**No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property lost how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers Part 7: 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Robert J. Adams & Associates Person Who Was Paid Attorney's Fee Aug 03, 2018 \$600.00 540 E. 35th Street Number Street Chicago, IL 60616 State ZIP Code City staff.rja@gmail.com Email or website address Camille Ortiz Person Who Made the Payment, if Not You Description and value of any property transferred Date payment or Amount of payment transfer was made Credit Advising, Inc. Person Who Was Paid ;;; \$10.00 Street Number \$0.00 \$0.00 State ZIP Code \$0.00 City Email or website address Camille Ortiz Person Who Made the Payment, if Not You

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Case 18-23282

Doc 1

otor 1	Case 18-2	.3282 N.	DOC 1	Filed 08/17/18 Document Ortiz	Page 45 of 64	Case number (if known	
ioi i	First Name		e Name	Last Name		Case Humber (II known	<i></i>
eal with your o not include No	vear before you filed ir creditors or to male any payment or tran in the details.	ke payme	nts to your cr	editors?	on your behalf pay or trans	sfer any property to anyon	ne who promised to help yo
			Description	n and value of any prope	erty transferred	Date payment or transfer was made	Amount of payment
Person Who	o Was Paid						
Number	Street						
			_				
City	State Z	IP Code					
31 140							
	in the details.		Descriptio transferred	n and value of property	Describe any pro	perty or payments received	d Date transfer was made
Yes. Fill	in the details. Discrepance Received Transfer				Describe any pro or debts paid in e	perty or payments received exchange	
Yes. Fill Person Who					Describe any pro or debts paid in e	perty or payments received exchange	
Yes. Fill Person Who	Received Transfer Street	IP Code			Describe any pro or debts paid in e	perty or payments received exchange	
Yes. Fill Person Who	Received Transfer Street	IIP Code			Describe any pro or debts paid in e	perty or payments received exchange	
Yes. Fill Person Who Number	O Received Transfer Street State Z	IP Code			Describe any pro or debts paid in e	perty or payments received	
Person Who Number : City Person's rel	Street State Z lationship to you	IP Code			Describe any pro or debts paid in e	perty or payments received exchange	
Yes. Fill Person Who Number	Street State Z Ilationship to you D Received Transfer Street	ZIP Code			Describe any pro or debts paid in e	perty or payments received	

btor 1	Case 18-2	23282 n.	Doc 1	Filed 08/17/18 Document	Entered 08/17/1 Page 46 of 64	.8 12:56:22 Des	
	First Name		e Name	Last Name		,	
ften called <i>as</i> ✓ No	sset-protection devi		kruptcy, did	you transfer any property	/ to a self-settled trust or sin	nilar device of which you ar	e a beneficiary? (These a
Yes. Fill	in the details.						
Name of tru	st		Descriptio	n and value of the prope	rty transferred		Date transfer was made
art Q: lie	t Cortain Financ	cial Acor	ounts Inst	truments, Safe Dono	sit Boxes, and Storag	a Units	
ansferred? clude check operatives,	ing, savings, money associations, and o	market, or	other financi	al accounts; certificates of	instruments held in your na deposit; shares in banks, cre	-	
	in the details.						
			Last 4 diç	gits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	ancial Institution Street		- XXXX- ₋ -		☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other		
City	State Z	IP Code	_				
	ancial Institution Street		- xxxx - ₋ -		☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other		
City	State Z	IP Code	_				
21. Do you no valuables? ☑No	ow have, or did you	have with	in 1 year befo	ore you filed for bankrupt	cy, any safe deposit box or o	other depository for securi	ties, cash, or other

Number Street City State ZIP Code State ZIP Code Droperty in a storage unit or place other than your home within 1 year before your details. Who else has or had access to it? Name Number Street City State ZIP Code State ZIP Code	Case number Describe the contents efore you filed for bankruptcy Describe the contents	Do you still have it? No Yes
Number Street City State ZIP Code State ZIP Code Describe Property You Hold or Control for Someone Else	efore you filed for bankruptcy	it? No Yes Yes Do you still have it? No
Number Street City State ZIP Code State ZIP Code Describe State ZIP Code State ZIP Code Describe State ZIP Code City State ZIP Code Describe State ZIP Code City State ZIP Code		y? Do you still have it? No
City State ZIP Code State ZIP Code Droperty in a storage unit or place other than your home within 1 year before your details. Who else has or had access to it? Name Number Street City State ZIP Code Property You Hold or Control for Someone Else		y? Do you still have it? □ No
City State ZIP Code State ZIP Code Droperty in a storage unit or place other than your home within 1 year before your details. Who else has or had access to it? Name Number Street City State ZIP Code Property You Hold or Control for Someone Else		Do you still have it?
State ZIP Code property in a storage unit or place other than your home within 1 year before your details. Who else has or had access to it? Describe Number Street City State ZIP Code Property You Hold or Control for Someone Else		Do you still have it?
property in a storage unit or place other than your home within 1 year before your details. Who else has or had access to it? Name Number Street City State ZIP Code Property You Hold or Control for Someone Else		Do you still have it?
Who else has or had access to it? Name		Do you still have it?
Number Street City State ZIP Code Property You Hold or Control for Someone Else	Describe the contents	it? ☐No
Number Street City State ZIP Code State ZIP Code Property You Hold or Control for Someone Else		
Number Street City State ZIP Code State ZIP Code Property You Hold or Control for Someone Else		Yes
City State ZIP Code State ZIP Code Property You Hold or Control for Someone Else		
State ZIP Code Property You Hold or Control for Someone Else		
Property You Hold or Control for Someone Else		
etails.	porrowed from, are storing for	or, or hold in trust for someone.
Where is the property? Describ	Describe the property	Value
Number Street		
Number Street City State ZIP Code		
	someone else owns? Include any property you b	comeone else owns? Include any property you borrowed from, are storing fo

Case 18-23282 Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main Document Page 48 of 64 Case number (if known) _______

Debtor 1

CamilleN.OrtizFirst NameMiddle NameLast Name

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

√ÍNo			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Co	de		
Have you notified any governmen	tal unit of any release of hazardous material?	•	
√ No			
_			
Yes. Fill in the details.			
Yes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice
	Governmental unit Governmental unit	Environmental law, if you know it	Date of notice
Name of site		Environmental law, if you know it	Date of notice
Name of site	Governmental unit	Environmental law, if you know it	Date of notice
Yes. Fill in the details. Name of site Number Street City State ZIP Co	Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	Date of notice
Name of site Number Street	Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	Date of notice
Name of site Number Street City State ZIP Co.	Governmental unit Number Street City State ZIP Code		
lame of site lumber Street	Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	

	Case 18-2		Doc 1	Docui	8/17/18 ment		Entered 08/ age 49 of 6				: Main
Debtor 1	Camille First Name	N. Middle N		Ortiz Last Na	me				Case number	(if known)	
			Court or a				Nature of the ca	ase			Status of the case
Case title			Court Name	•		_					☐Pending
											☐On appeal☐Concluded
			Number	Street		_					Goonolaaca
Case numb	er	-	City	State	ZIP Code	_					
27. Within 4 y	ive Details About years before you file sole proprietor or self	ed for bankru	uptcy, did y	ou own a bus	siness or ha	ive a	ny of the followir		nections to any	business?	
☐ A r	member of a limited I	liability compa	any (LLC)	or limited liabil	ity partnersh	nip (L	LP)				
_ A _	partner in a partnersh	nip									
☐ An	officer, director, or n	nanaging exe	ecutive of a	corporation							
☐ An	owner of at least 5%	% of the voting	g or equity	securities of a	corporation						
✓ No. Nor	ne of the above applie	es. Go to Part	12.								
☐Yes. Ch	eck all that apply abo	ove and fill in	the details	below for each	n business.						
				e the nature o		ess			oyer Identificati ot include Socia		ımber or ITIN.
Name 								EIN:			
Number	Street		Name of	accountant o	or bookkeep	per		Dates	business exist	ed	
								Fron	n	To	
City	State Z	IP Code									
Nome			Describe	e the nature o	f the busine	ess			oyer Identificati ot include Socia		ımber or ITIN.
Name 								EIN:			
Number	Street		Name of	accountant o	or bookkeep	per		Dates	business exist	ed	
								Fron	n	_ To	
City	State Z	IP Code									

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City

ZIP Code

State

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Document

Camille Debtor 1 Ortiz Case number (if known). First Name Middle Name Last Name Sign Below Part 12: I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Camille N. Ortiz
Signature of Camille N. Ortiz, Debtor 1 Signature of Date 08/17/2018 Date -Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? **√**No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

√No

Yes. Name of person ____

Fill in this information t	to identify your case:			1//18 12.50	.22 Desc Main
Debtor 1	Camille	N.	Ortiz		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankru	ptcy Court for the:	N	orthern District of Illinois		
Case number (if known)					Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Identify the cree	ditor and the property that is collateral	What do you intend to do with the property that s debt?	secures a Did you claim the property exempt on Schedule C?
Creditor's name:	Wells Fargo Dealers Svcs	☐ Surrender the property.☐ Retain the property and redeem it.	☑ No □ Yes
Description of property	2006 Land Rover Range Rover Sport	✓ Retain the property and enter into a Reaffirmation Agreement.	- 100
securing debt:		Retain the property and [explain]:	

Debtor 1

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Middle Name

Dogument

Part 2: List Your Unexpired Personal Property Leases

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	☐ No
	Yes
escription of leased operty:	
ssor's name:	☐ No
escription of leased operty:	Yes
ssor's name:	☐ No
escription of leased operty:	Yes
essor's name:	□ No
escription of leased roperty:	Yes
essor's name:	☐ No
escription of leased roperty:	Yes
essor's name:	☐ No
escription of leased roperty:	Yes
essor's name:	□ No
escription of leased roperty:	Yes
t 3: Sign Below	
nder penalty of perjury, I declare that I have indicated my intention about any subject to an unexpired lease.	property of my estate that secures a debt and any personal property that
/s/ Camille N. Ortiz	
	Debtor 2

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United States Bankruptcy Court Northern District of Illinois

In re	Ortiz, Camille N.	Case No	
	Debtor(s)	Chapter 7	
	DISCLOSURE	E OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)	
1.	named debtor(s) and that c bankruptcy, or agreed to be	9(a) and Fed. Bankr. P. 2016(b), I certify that I am the atto ompensation paid to me within one year before the filing paid to me, for services rendered or to be rendered on be of or in connection with the bankruptcy case is as follows:	of the petition in
	FLAT FEE		
	For legal services, I hav	re agreed to accept	\$600.00
	Prior to the filing of this	statement I have received	
	Balance Due		\$600.00
	RETAINER		\$0.00
	For legal services, I have	re agreed to accept and received a retainer of	
	The undersigned shall I	oill against the retainer at an hourly rate of	
		te schedule.] Debtor(s) have agreed to pay all Court enses exceeding the amount of the retainer.	
2.	\$335.00 of the filing fee ha	as been paid.	
3.	The source of the compensat	ion to be paid to me was:	
	☑ Debtor	Other (specify)	
4.	The source of compensation	to be paid to me is:	
	☑ Debtor	Other (specify)	
	☑ I have not agreed to share unless they are members and	e the above-disclosed compensation with any other person associates of my law firm.	า
	persons who are not member	e above-disclosed compensation with a other person or so or associates of my law firm. A copy of the agreement, nes of the people sharing in the compensation, is attached	d.
6.	In return for the above-disclos	sed fee, I have agreed to render legal service for all aspec	ots

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

of the bankruptcy case, including:

Case 18-23282	Doc 1	Filed 08/17/18	Entered 08/17/18	12:56:22 De	esc Main
Ortiz, Camille N.		Document	Page 55 of 64	Case No.	

Debtor(s)

In re

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- 7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/17/2018/s/ Robert J AdamsDateSignature of Attorney

Robert J. Adams & Associates

Name of law firm

Case 18-23282 Doc 1 INFINE OF INFINE

IN RE: Ortiz, Camille N. CASE NO
CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The at	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.		
Date	08/17/2018	Signature	/s/ Camille N. Ortiz Camille N. Ortiz. Debtor

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FedLoan Servicing, Po Box 69184 Harrisburg, PA 17106

Abc Financial PO Box 6800 North Little Rock, AR 72124

Capital One 15000 Capital One Richmond, VA 23238

Capital One Bank PO Box 85147 Richmond, VA 23276

Central Credit Services, LLC 9550 Regency Square Blvd, #500A Jacksonville, FL 32225

City Of Chicago (Parking Tickets) Office Of The Clerk: Attn: Anna Valencia 121 N. LaSalle 107A Chicago, IL 60602

Comcast PO Box 3002 Southeastern, PA 19398

Credit Collection Services 725 Canton St Norwood, MA 02062-2679

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Credit One Bank PO Box 98872 Las Vegas, NV 89193

Edward R. Szymanski POP Box 5358 Elgin, IL 60121

Facts Management 121 S. 13th St. 301 Lincoln, NE 68508

Kohls Department Store N56W17000 Ridgewood Menomonee Falls, WI 53051

Northwest Collectors Inc. 3601 Algonquin Rd. Ste. 500 Rolling Meadows, IL 60008-3146

Personal Finance Company PO Box 43490 Nottingham, MD 21236

Simm Associates, Inc. PO Box 7526 Newark, DE 19714-7526

Sir Finance 424 W. 31st St Chicago, IL 60616

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Wells Fargo Dealers Svcs PO Box 1697 Winterville, NC 28590 Case 18-23282 Doc 1 Filed 08/17/18 Entered 08/17/18 12:56:22 Desc Main Document Page 60 of 64

De	ו וסוט	Camille	N.		Ortiz		Casa	number	(if known)	
		First Name	Midd	ile Na	me Last f	Name	Case	lumber	(if known)	
Pa	rt 6: Answa	r Thoso Oue	ctions for	. n	orting Purpose					
	as of Allama	r inese que	Stions for	Kep	orting Purpose	5				
16	. What kind o	of debts do yo	16a. u	Are	your debts prima urred by an individ	rily consumer a	debts? Consumer debts are def r a personal, family, or househol	ined in 1	11 U.S.C. § 101(8) as	
	naver				No. Go to line 16			- 1 1		
					Yes. Go to line 17					
00.000000000000000000000000000000000000			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
***************************************					No. Go to line 16d					
					Yes. Go to line 17	na a				
			16c.	Stat	e the type of debts	you owe that a	re not consumer debts or busin	ess debí	ds.	
4	A									
17.	Are you filin 7?	g under Chap	ter 🔲	No.	I am not filing und	ler Chapter 7.	Go to line 18.			
	Do you estin	nate that after	Ø	Yes.	I am filing under administrative ex	Chapter 7. Do y	you estimate that after any exend that funds will be available to a	ipt prope	erty is excluded and	
	any exempt	d administrati	ve		☑ No	U 3111.0000	- wattande will be dydliable to	alsti ibute	e to unsecured creditors?	
	will be availa	e paid that fur ible for	ids		☐ Yes					
	distribution t creditors?	to unsecured								
			$\mathbf{\Delta}$	1-49	50-99 10	00-199	1,000-5,000 🗖 5,001-10,00	0 🗖	25,001-50,000	
18.	How many control estimate that	reditors do yo	ou 🔲	200-	999		10,001-25,000		50,000-100,000	
	ootimate that	. you owe?								
				\$0-\$8	50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion	
19.	How much de your assets t	o you estimat	е 🔲	\$50,0	001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion	
	,	o be worth?		\$100	,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion	
				\$500	,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion	
				\$0-\$5	50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion	
20.	How much de your liabilities	o you estimat s to be?	e √	\$50,0	001-\$100,000		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion	
	,	0 10 501		\$100	,001-\$500,000		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion	
				\$500	,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion	
Part	7: Sign Bel	ow								
For	you	l ha	ve examine	d this	petition, and I decl	are under pena	alty of perjury that the information	n provid	ed is true and correct.	
		11.1.1	lave chosel	n to tii	e under Chapter 7	am aware the	at I may proceed, if eligible, und uch chapter, and I choose to pro-	01	7 44 40	
		IT no	attorney re	prese	ents me and I did n	of pay or agree	to nav someone who is not an	eed und	to help me fill out this document, I	
					ad the house requi	ied by 11 0.5.	U. 9 342(D).			
		l red	luest relief i	n acc	ordance with the cl	napter of title 1	1, United States Code, specified	in this p	etition.	
		ban	kruptcy cas	aking e <mark>¢a</mark> n	a false statement, result in fines up to	concealing pro \$250,000, or	perty, or obtaining money or pro	perty by	fraud in connection with a . 18 U.S.C. §§ 152, 1341, 1519,	
		and	3571	11	1/1		, and the op to 20 yours	or both	. 10 0.0.0. 99 132, 1341, 1319,	
)	(M	///					
					z, Debtor 1					
			Executed		8/17/2018 MM/ DD/ YYYY	_				
*********	***************************************		***************************************			***************************************				

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

8/17/2018

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IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

IN RE: Ortiz, Camille N.

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The a	bove named Debtor	hereby verifies th	at the attach	ed lis	of	redi	tors is true and correct to the best of his/her knowledge
Date _	08/17/2018	Signature		1/		1	
			V	V	1	/	Camille N. Ortiz, Debtor

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Debtor 1	Camille First Name	N.	Ortiz	Case nu	umber (if known)	
**Partiture recommendation of the state of t	First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
1	yment compensation			\$0.00	non-ming spouse	
			unt received was a benefit u	nder		
For	you			\$0.00		
For	your spouse					
9. Pension of under the	or retirement income. Social Security Act.	Do not include any a	mount received that was a b	enefit \$0.00		
received	as a victim of a war cr	eived under the Soci ime, a crime against	pecify the source and amoun al Security Act or payments humanity, or international or on a separate page and put t			
Disability	Income			\$770.33		
Total am	ounts from a				-	
Annual Property and the Control of t	ounts from separate pa			+ <u></u>	+	No.
11. Calculate column.	e your total current m e Then add the total for t	onthly income. Add I Column A to the total	ines 2 through 10 for each for Column B.	\$2,602.68	+	\$2,602.68 Total current
and a second sec						monthly income
Part 2: De	termine Whether t	he Means Test A	pplies to You			
The same of the sa	your current monthly					
E			7/-			
	tiply by 12 (the numbe				Copy line 11 here →	\$2,602.68
*	result is your annual in				30000000	x 12
					12b	\$31,232.16
			ou. Follow these steps:			
Fill in the s	state in which you live.		Illinois			
Fill in the r	number of people in yo	ur household.	6			
instruction			e of household o online using the link specif le at the bankruptcy clerk's o	ied in the separate office.	13.	\$113,285.00
	io i dito.			1, There is no presumption of abo		
14b. 🖵 Lir Go	ne 12b is more than lin to Part 3 and fill out F	e 13. On the top of p orm 122A-2.	age 1, check box 2, The pre	sumption of abuse is determined	by Form 122A-2.	
Part 3: Sig	n Below					
By signir	ng here, I declare unde	r penalty of perjury t	nat the information on this st	atement and in any attachments	is true and correct.	
X _(UM			X		
Sign	ature of Debtor 1		-	Signature of Debtor 2		
Date	08/17/2018 MM/DD/YYYY			Date		And provided the second of the
If you ch	ecked line 14a, do NO	T fill out or file Form	122A-2.			
	ecked line 14b, fill out					CONTRACACE

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Case <u>18-2</u> 32	82 Doc 1	Filed 08/17/18	Entered 08/17	/18 12:56:22	Desc Main
First Name	N. Middle Nan	ne Docu niënt Last Name	Page 63 of 64		

Part 2: List Your Unexpired Personal Property Leases

Describe your unexpired personal property	leases	Annual Control of the
Lessor's name:	100000	Will the lease be assumed? ☐ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:		☐ No
Description of leased property:		Yes
essor's name:		□ No
Description of leased property:		Yes
essor's name:		
Description of leased property:		Yes
nder penalty of perjury, I declare that I have incoperty that is subject to an unexpired lease.	dicated my intention about any property of my estate th	at secures a debt and any personal
signature of Debtor 1	Signature of Debtor 2	
Pate 08/17/2018	Date	*
Pate 08/17/2018 MM/ DD/ YYYY	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

8/17/2018 Entered 08/17/18 12:56:22 Desc Main Case 18-23282 Doc 1 Filed 08/17/18 Page 64 of 64 Document Debtor 1 Camille Ortiz Case number (if known) _ First Name Middle Name Last Name 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. V No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Camille N. Ortiz, Debtor 1 Signature of Date 08/17/2018 Date -Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? M No Yes

Official Form 107

☑ No

Yes. Name of person .

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).